

DIVISION OF DISABILITY AND ELDER SERVICES

DATE: August 24, 2006

TO: Medicaid Waiver Manual Holders

FROM: The Bureau of Long Term Support

RE: Summary of July 2006 Interim Medicaid Waiver Manual Release

This release includes revised and updated material for the currently available Chapter II and Chapter IV of the Interim Medicaid Waivers Manual. What follows below are tables highlighting the changes and additions to the interim manual. The table contains only a very brief summary of what is new and what has been revised since the April 2005 release. To gain a more complete understanding of the revision, manual holders are encouraged to read the complete documents as soon as time permits.

This revision will be posted to the Department website soon. Questions may be directed to the appropriate Section within the Bureau of Long Term Support.

New and Updated Material, Medicaid Waivers Manual - Chapters II and IV

Chapter	Page Number	Section and Summary of Changes
Chapter II Waiver Eligibility	Page II-3	<u>Section 2.02(C)</u> : Clarifies CIP II/COP-W target group eligibility.
	Page II-4	<u>Section 2.02(C) (2) (e)</u> : Language added to clarify eligibility of children for CIP II/COP-W.
	Page II-5	<u>Section 2.02(D) (1, 2 and 3)</u> : The descriptions of the three CLTS Target Groups have been updated.
	Page II-6	<u>Section 2.04(A)</u> : Revised the description of what constitutes <i>active treatment</i> in the community and added expectation that children up to 21 will benefit from education and training.
	Page II-6	<u>Section 2.04(B)</u> : The NAT description is revised and the criteria for NAT clarified. "Terminal illness" placed under the heading of factors to be considered if the person is 65 years of age or older.

Chapter	Page Number	Section and Summary of Changes
Chapter II, continued	Page II-7	<u>Section 2.04(C)</u> : The description of the procedure to request an NAT has been revised.
	Page II-8	<u>Section 2.05(A)</u> : Additional text has been added to clarify residency requirements that must be met access the CLTS waiver.
	Page II-8	<u>Section 2.05(B)</u> : Additional language included to explain the CLTS requirement for disability determination for some participants.
	Page II-13	<u>Section 2.08(A)(2)(c) Participant Moves</u> : Section updated to address use of Family Support funds when a participant moves.
	Page II-20 and Page II-21	<u>Section 2.09(B)(2) & (B)(3)</u> : Additional language noting that the content of any notice of reduction or termination of services 2.09 (B)(2) or termination of participation 2.09 (B)(3) shall inform the participant that if a reduction or termination is appealed and waiver services continue; the costs of those services may be recouped by the agency if the termination or reduction is upheld.
Chapter IV Allowable Services	Page IV-3	<u>Section 4.04(B)</u> : Revised text clarifies the distribution and approval process for the county Conflict of Interest plan.
	Page IV-5	<u>Section 4.05(E)</u> : Caregiver Background Checks. The revised the text describes the prohibition against use of program funds to pay professional providers (e.g., SPC 507) who have been denied credentials or who have had their license/certification suspended or a renewal denied.
	Page IV-9	<u>Section 4.07</u> : Participant Contributions: New section added to Chapter IV . This section replaces Section 3.05, Voluntary Contributions in Chapter III of the BDDS Interim Medicaid Waivers Manual. The new Section 4.07 addresses when participant contributions may or may not be accepted by the agency.

Chapter	Page Number	Section and Summary of Changes
Chapter IV, continued	Page IV-16	<u>SPC 102 - Adult Day Care:</u> New text was added to the requirement for a variance to receive Adult Day Care services in a nursing home. The language makes it clearer what the variance request must contain.
	Page IV-18	<p><u>SPC 202.01 - Adult Family Home (1 – 2 Beds):</u></p> <p>The definition was corrected, removing language (“<i>who are not related to the licensee</i>”) that does not apply to this SPC.</p> <p>New text added to the documentation section listing requirement that documentation of room and board and care and supervision calculations be maintained in the participant file.</p>
	Page IV-20	<p><u>SPC 202.02 Adult Family Homes 3 – 4 Beds:</u></p> <p>New text added to the documentation section listing requirement that documentation of room and board and care and supervision calculations be maintained in the participant file.</p>
	Page IV-22	<u>SPC 604 – Care Management/Support and Service Coordination:</u> The service requirements/limitations section was updated to include a reference to Community Care Services (CCS). Adjusted
	Page IV-44	<p><u>SPC 506.61 - CBRF:</u> New text was inserted into the requirements/exclusions/limitations section. The language makes it clear that <u>the use of waiver funds is not allowed for a facility that is located within or that is structurally connected to a nursing home or ICF-MR,</u> except where the facilities are connected by common service areas for laundry, kitchen or utility purposes.</p> <p>The new section also addresses the prohibition against shared staffing in these facilities. These prohibitions have been in place for some time but until this revision, had not been spelled out in the waiver manual.</p> <p>New text added listing requirement that documentation of room and board and care and supervision calculations be maintained in the participant file.</p>

Chapter	Page Number	Section and Summary of Changes
Chapter IV, continued	Page IV-56-57	<p><u>SPC 507-Counseling and Therapeutic Services:</u> Revised text in the requirements section specifies that SPC 507 providers must meet licensing standards described in section 4.05(E).</p> <p>The Standards section was revised to specify that licensing/ certification credentials are not required for nonprofessional providers. Such services must however, be authorized by a medical professional.</p>
	Page IV- 79	<p><u>SPC 112.56 Home Modifications:</u> The definition was revised to make it clear that “ramps” in this SPC refer to fixed/non-portable ramps and notes that portable ramps may be allowable as Adaptive Aids.</p>
	Page IV-86	<p><u>SPC 512 – Intensive In-Home Treatment for Children:</u></p> <p>The description of <i>Family Involvement</i> in the treatment team roles is clarified.</p>
	Page IV-103	<p><u>SPC 711- Residential Care Apartment Complex:</u></p> <p>New text added listing requirement that documentation of room and board and care and supervision calculations be maintained in the participant file.</p>
	Page IV-106	<p><u>SPC 103-Respite Care:</u> Contains a revised definition of “emergency” as it pertains to caregiver availability and use of respite in institutional settings.</p> <p>A separate section addressing the use of Institutional Respite for CLTS participants has been added.</p>